2022- 2023 Academic Year



Terms and Conditions

About the Scholarship Program:

Stuyve Hamersley created and endowed this scholarship in honor of his wife, Geri Craig Hamersley. Mrs. Hamerlsey was a native of Arizona and avid supporter of education, particularly English usage, from being an educator for many years.

Eligibility:

- U.S. citizen or permanent resident and Arizona resident for tuition purposes at public colleges.
- High school senior graduating from Wickenburg High School with high academic potential as indicated by grade point average and standardized test scores.
- Financial need as determined by the Free Application for Federal Student Aid (<u>www.fafsa.ed.gov/</u>)
- Participation in school and community activities.
- Full-time student admitted to an accredited 2- or 4-year post-secondary institution with the intent to study in the field of Teaching (Ex: school administrator, instructional coordinator, librarian, school guidance counselor, college or university academic advisor, English as a foreign language teacher).

Awards:

- 1. One \$2,300 award, in one payment before the start of the school year.
- 2. One \$1,000 award, in one payment before the start of the school year.

This scholarship is not automatically renewed, although a student awarded in previous years can re-apply for consideration.

Application Process:

Submit the application materials by the deadline below to:

Mike Wallace Chamber of Commerce 216 N. Frontier St. Wickenburg, AZ 85390

Application Deadline: Monday, April 3, 2023

Scholarship Award Announced: At the 2023 Wickenburg High School Awards Ceremony in May.

Note: In addition to any other terms and conditions, the number and amount of all Arizona Community Foundation scholarship awards and renewals is contingent on the availability of funding.

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	ation Check List and Cover Sheet I not consider incomplete packets)					
 Studen	Name (please print)	// Date of Birth				
Му арр	lication includes:					
	□ This checklist and cover sheet.					
	Two letters of recommendation including the Letter of Recommendation Forms.					
	□ Official high school transcript through the seventh semester.					
•	Completed application.					
Certific	ation and Signatures					
l certify • • •	that: The application packet is complete. The information in the application is true and accurate to the best of my knowl The essay I submitted is my original work. I authorize my high school, college, or university to release academic, financia as required by the donor and/or the Arizona Community Foundation.					
Student	Signature	Date				
	Legal Guardian Signatureed for students under 18 years of age)	Date				

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The selection of scholarship recipients is influenced by the completeness of replies. Print your responses using black ink. You may also print responses separately using a minimum front size of 10 and paste to the form.

A. Applicant Info	rmation							
Full Name				Preferred Name or N	lickname			
Gender 🖵 Female	☐ Male	Date of Birth						
Home Address			City		State	2	Zip	
Phone Number ()	E-ma	il Address					
Achievements (posit	ions held, honors	s/awards, letters earne	ed, special reco	gnition). Include mor	ith/year of բ	oartic	ipatior	ղ:
Month/Year								
B. Family Informa	ntion							
Father's/Guardian's Fu	ıll Name				Living?	_ ·	Yes	□ No
					•			
		mes, ages, school/colle			- 0			
Name		Age	Sch	nool/College			Grade	e Level
C. Academic Info	rmation							
Cumulative GPA	ACT Score	Date Take	n	SAT (Cumulative)	Da	te Ta	ken _	
To which universities	s have you applie	d?						
To which universities	s have you receiv	red letters of admission	n?					
What is your intende	ed career choice?							

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What is your intended major	What is your intended major in college?					
D. Community Service Act	tivity					
Activity		Hrs. Invested Per Week	Hrs. Invested Per Year	Month/Year of Participation		

E. Essay Question

Your essay should demonstrate style, depth, breadth of knowledge, and individuality. Responses should be no more than 500 words. Neatly print your essay and include it with the application. You may also print your essay separately using a font size no smaller than 10 point and paste to this form. Give considerable thought to your writing because this is the most heavily weighted portion of the application in the readers' decisions.

<u>Essay:</u> Describe your life goals and how education plays a role in achieving them. How will funding from this scholarship affect your goals?

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Letter of Recommend (Applicant to submit tw	dation Form vo letters of recommenda	ntion)			
PART A: To be completed by the	e student.				
Student Name					
Addross	First	Middle		Last	
Address					
City			State	Zip Code	
	o view this letter of recon right to view this letter o		recommende	ed).	
Student Signature				Date	
PART B: To be completed by the individual providing the recommendation (teacher, HS administrator or counselor, employer or volunteer service leader).					
RECOMMENDATION	FORM INSTRUCTIONS				
When completed, place this recommendation in a sealed envelope, sign across the seal and return to the student. Please TYPE YOUR RECOMMENDATION or neatly print using black ink. You may use the back of this sheet for your comments. If you print your recommendation separately, please include this form with it.					
 STRENGTHS: What are the student's academic strengths and weaknesses? PERSEVERANCE: Are there special circumstances or obstacles that the student has had to overcome? LEADERSHIP: In what ways does this student show strong evidence of leadership ability? CHARACTER: How does the student demonstrate character? TALENT/SKILLS: Does the student have any special talents or skills? 					
Your evaluation will be	ecome part of the student	's confidential file inten	nded for use b	by the selection committee.	
Name (please print) _				Title	
Work Phone		Length of Associa	tion with Stud	dent	
In what capacity?					
Signaturo			Date		

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	mmendation Form ubmit two letters of recommer	ndation)			
PART A:					
To be complete	d by the student.				
Student Name _					
	First	Middle	Last		
Address					
City		State	Zip Code		
	right to view this letter of reco	ommendation. (Strongly recommende of recommendation.	ed).		
Student Signatu	ire		Date		
volunteer servic		·	lministrator or counselor, employer or		
Please TYPE Y	OUR RECOMMENDATION or	in a sealed envelope, sign across the r print using black ink. You may use the separately, please include this form w	ne back of this sheet for your		
*	STRENGTHS: What are th	e student's academic strengths and v	veaknesses?		
*	PERSEVERANCE: Are the	ere special circumstances or obstacles	s that the student has had to overcome?		
LEADERSHIP: In what ways does this student show strong evidence of leadership ability?					
 CHARACTER: How does the student demonstrate character? TALENT/SKILLS: Does the student have any special talents or skills? 			skille?		
•	TALLINITORILLO. DOGS the	o diduciti flavo dilly opecial talonio di c	ortino :		
Your evaluation	will become part of the studer	nt's confidential file intended for use b	y the selection committee.		
Name (print)	Title				
Work Phone		Length of Association with the Student			
In what capacity	?				
Cianatura		Dete			